

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	10/24/90
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	18	11/5/90
FORMALITY REVIEW	<i>[Signature]</i>	10809	11/29/90
RESPONSE FORMALITY REVIEW	<i>Tequest</i>	925	04-11-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	12/5/90
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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45	✓
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47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	12/5/90
51	✓
52	✓
53	✓
54	✓
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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